

FACSIMILE COVER SHEET

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MESSAGE: FORMAL SUBMISSION OF:

- 1) Transmittal (1 pg.);
- 2) Fee transmittal (1 pg.); and
- 3) Request for Reconsideration (7 pgs.).

Attorney Docket No.: OOCL-152 (6MHA-03S0555P1)

Appl. No.: 10/780,440

Applicants: Sumio KAWAI, et al.

Filed: February 17, 2004

Title: PHOTOGRAPHING DEVICE PROVIDED WITH DUST REMOVING MECHANISM

TC/A.U.: 2622

Examiner: Yogesh K. Aggarwal

CERTIFICATE OF FACSIMILE TRANSMISSION

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Modified PTO/SB/21 (08-00)

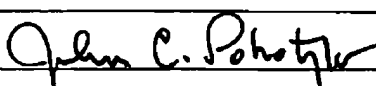
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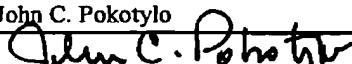
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/780,440	
	Filing Date	February 17, 2004	
	First Named Inventor	Sumio KAWAI	
	Group Art Unit	2622	
	Examiner Name	Yogesh K. Aggarwal	
Total Number of Pages in This Submission		Attorney Docket Number	OOCL-152 (6MHA-03S0555P1)

ENCLOSURES <i>(check all that apply)</i>		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Postcard Receipt <input type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	John C. Pokotylo (Reg. No. 36,242)
Signature	
Date	August 14, 2009

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Modified PTO/SB/17 (01-03)

Approved for use through 04/30/2003. OMB 0651-0032
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**FEE TRANSMITTAL
for FY 2008**

Effective 09/30/2007. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 0.00

Complete if Known

Application Number	10/780,440
Filing Date	February 17, 2004
First Named Inventor	Sumio KAWA
Examiner Name	Yogesh K. Aggarwal
Art Unit	2622
Attorney Docket No.	OOCL-152 (6MHA-03S0555P1)

METHOD OF PAYMENT (check all that apply)
☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None
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Account
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50-1049

Straub & Pokotylo

The Commissioner is authorized to: (check all that apply)

☒ Charge any underpayment of fee(s) indicated below ☒ Credit any overpayments☒ Charge any fee(s) due in connection with the filing submitted herewith☒ Charge fee(s) indicated below, except for the filing fee in the to the above-identified deposit account.**FEE CALCULATION****1. BASIC FILING, SEARCH & EXAMINATION FEES**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1090	545	Utility fee	
460	230	Design fee	
720	360	Plant fee	
1520	760	Reissue fee	
220	110	Provisional fee	
SUBTOTAL (1)			(\$) 0.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent	-20** =	X	
Multiple Dependent	-3** =	X	

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202	2202	26 Claims in excess of 20
1201	2201	110 Independent claims in excess of 3
1203	2203	195 Multiple dependent claim, if not paid
1204	2204	110 **Reissue independent claims over original patent
1205	2205	26 **Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) 0.00

**or number previously paid, if greater. For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051	130	2051 65 Surcharge - late filing fee or oath	
1052	50	2052 25 Surcharge - late provisional filing fee or cover sheet	
1053	130	1053 130 Non-English specification	
1812	2,520	1812 2,520 For filing a request for ex parte reexamination	
1804	920*	1804 920* Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805 1,840* Requesting publication of SIR after Examiner action	
1251	130	2251 85 Extension for reply within first month	
1252	490	2252 245 Extension for reply within second month	
1253	1,110	2253 555 Extension for reply within third month	
1254	1,730	2254 865 Extension for reply within fourth month	
1255	2,350	2255 1,175 Extension for reply within fifth month	
1401	540	2401 270 Notice of Appeal	
1402	540	2402 270 Filing a brief in support of an appeal	
1403	1,080	2403 540 Request for oral hearing	
1451	1,510	1451 1,510 Petition to institute a public use proceeding	
1452	540	2452 270 Petition to revive - unavoidable	
1453	1,620	2453 810 Petition to revive - unintentional	
1501	1,510	2501 755 Utility issue fee (or reissue)	
1502	860	2502 430 Design issue fee	
1503	1,190	2503 595 Plant issue fee	
Petitions to the Commissioner - check fee sheet			
1807	50	1807 50 Processing fee under 37 CFR 1.17(c)	
1806	180	1806 180 Submission of Information Disclosure Stmt	
8021	40	8021 40 Recording each patent as signment per property (times number of properties)	
1809	810	2809 405 Filing a submission after final rejection (37 CFR 1.129(a))	
1810	810	2810 405 For each additional invention to be examined (37 CFR 1.129(b))	
1801	810	2801 405 Request for Continued Examination (RCE)	
1802	900	1802 900 Request for expedited examination of a design application	

Other fee (specify)

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 0.00

SUBMITTED BY

(Complete if applicable)

Name (Print/Type)	John C. Pokotylo	Registration No. (Attorney/Agent)	36,242	Telephone	(732) 936-1400
Signature	<i>John C. Pokotylo</i>	Date	August 14, 2009		

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